

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:		PAGE 513 OF 921	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Elizabeth for MA, Inc.

Full Name (Last, First, Middle Initial) Jim D Moore		Date of Receipt M M D D Y Y Y 01 31 2015
Mailing Address 4722 Waukesha St		Transaction ID : C10625794
City Madison	State WI	Zip Code 53705
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00	

Full Name (Last, First, Middle Initial) Marilyn A. Moorlach		Date of Receipt M M D D Y Y Y 03 30 2015
Mailing Address PO Box 111		Transaction ID : C10661663
City Brandon	State SD	Zip Code 57005-0111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) George W Morgan		Date of Receipt M M D D Y Y Y 03 16 2015
Mailing Address 336 Doyle Ave		Transaction ID : C10645538
City Providence	State RI	Zip Code 02906
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 220.00	

SUBTOTAL of Receipts This Page (optional)	230.00
TOTAL This Period (last page this line number only)	

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